Jan Brewer Secretary of State Limited Partnerships 1700 West Washington 7<sup>th</sup> Fl Phoenix, Arizona 85007



Secretary of State Use:

Make Check Payable to: Secretary of State Fee: \$3.00

SUBMIT IN DUPLICATE with a self-addressed, stamped envelope.

All correspondence regarding this filing will be sent to the principal office.

## ANNUAL REPORT PURSUANT A.R.S. §29-1103 LIMITED LIABLITY PARTNERSHIP OR FOREIGN LIMITED LIABILITY PARTNERSHIP

Annual report due between January 1 and April 30 of each year

Name of the limited liability partnership	Secretary o	Secretary of State File number (optional)		
Date the Certificate of Limited Partnership wa	s filed (optional):			
Name of agent for service of process	Phone Nun	Phone Number		
Arizona address of agent (PO Box and c/o are	not acceptable) City	Arizona	Zip	
The Arizona address of the office where the list	st of names and addresses of	f the limited partners are ke	ept:	
Street address of chief executive office in Ariz	cona (PO Box and c/o are no	ot acceptable) City	Zip	
The address of the office to be maintained in the	he state of organization:			
Address	City	State	Zip	
Other pertinent matters affecting the Limited I	Liability Partnership:			
I declare under penalty of law, that I (we) have they are true, correct and complete.  Signature of general partners:	e examined this report and to	o the best of my (our) know	vledge, believe	
Signature	Print Name	Date		
Signature	Print Name	Date		